PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

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## TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

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FOR TRANSPORT **Application Number** 10/089,496 Filing Date July 30, 2001 First Named Inventor Antrim et al. 1616 Art Unit **Examiner Name** S. Mark Clardy Attorney Docket Number 006401 00378

Total Number of Pages in This Submission			Attorney Docket Number		006401.00378		
ENCLOSURES (check all that apply)							
Fee Transmittal Form		Assignment Papers (for an Application)			After Allowance Communication to Group		
Fee Attached		Drawing(s)			Appeal Communication to Board of Appeals and Interferences		
Amendment / Response		Licensing-related Papers			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Final		Petition			Proprietary Information		
Affidavits/declaration(s)		Petition to Convert to a Provisional Application			Status Letter		
Extension of Time Request		Power of Attorney, Revocation Change of Correspondence Address			Other Enclosure(s) (please identify below):		
Express Abandonment Request		☐ Terminal Disclaimer ☐ Request for Refund			Certificate of Mailing, IDS cover page, 15 references, Return Postcard.		
Information Disclosure Statement		CD, Nu	mber of	CD(s)			
Certified Copy of Priority Document(s)		Remai	ks				
Response to Missing Parts/ Incomplete Application							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm or Individual name	Allen E. Hoover; Reg. No. 37,354						
Signature							
Date	1/5/03						

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(person actually depositing)

Patent Application of: Attorney Docket No.

Antrim et al. 006401.00378

Title:

**ROOT RETARDANT** 

- Transmittal Form
- Fee Transmittal
- Response to Office Action
- IDS Cover Page
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Approved for use through 01/31/2003. OMB 0651-0032

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

JAN 1

(\$)	180.	00

	Complete if Kn	own
Application Number	10/089,496	Rn
Filing Date	July 30, 2001	- Cr
First Named Inventor	Antrim et al.	
Examiner Name	S. Mark Clardy	NAN I
Art Unit	1616	ECH O 21
Attorney Docket No.	006401.00378	CENTER

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METHOD OF PAYMENT (check all that apply)					FEE C	ALCULATION (continued)	<del>~'' 160</del> 0/
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None			IANOITIC				,
Order  Deposit Account:		Large	Entity	Small E	ntity		
Deposit Deposit			Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account	19-0733	1051	130	2051	65	Surcharge - late filing fee or oath	
Number			50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit			130	1053	130	Non-English specification	
Account Banner & Witcoff, Ltd. Name			2,520	1812	2,520	For filing a request for exparte reexamination	
The Commissioner is authorized to: (check all that apply)			920*	1804	920*	Requesting publication of SIR prior to Examiner action	
☐ Charge any add	dicated below	1805	1,840°	1805	1,840*	Requesting publication of SIR after Examiner action	
	fied deposit account.	1251	110	2251	55	Extension for reply within first month	
to the above identifi	FEE CALCULATION	1252	410	2252	205	Extension for reply within second	-
		1232	410	2232	203	month	i l
1. BASIC FILII	NG FEE	1253	930	2253	465	Extension for reply within third month	
	<u>small Entity</u> se Fee Fee Description	1254	1,450	2254	725	Extension for reply within fourth	
Code (\$) Co	ode (\$) Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month	<del>  </del>
1001 750 20	001 375 Utility filing fee	1401	320	2401	160	• • •	$\vdash$
1002 330 20	002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	<b> </b>
1003 520 20	003 260 Plant filing fee		280	2402		Filing a brief in support of an appeal	
1004 750 20	004 375 Reissue filing fee	1403	200	2403	140	Request for oral hearing	<b>  </b>
1005 160 20	005 80 Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	SUBTOTAL (1) (\$) 0	1452	110	2452	55	Petition to revive – unavoidable	
		1453	1,300	2453	650 °	Petition to revive – unintentional	
2. EXTRA CLAIM	· -	1501	1,300	2501	650	Utility issue fee (or reissue)	
	Extra Fee from Fee	1502	470	2502	235	Design issue fee	
Total Claims	- ** = 0	1503	630	2503	315	Plant issue fee	
		1460	130	1460	130	Petitions to the Commissioner	
Independent Claims	- " = 0   X   0   = 0	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Multiple o	x 0 = 0	1806	180	1806	180	Submission of Information Disclosure Stmt	180.00
Dependent						Recording each patent assignment	
Large Entity	Small Entity	8021	40	8021	40	per property (times number of properties)	
Fee Fee Code (\$)	Fee Fee <u>Fee Description</u> Code (\$)	1809	750	2809	375	Filing a submission after final rejection	, —
1202 18	2202 9 Claims in excess of 20	40.0	750	0010	275	(37 CFR § 1.129(a))	
1201 84 1203 280	2201 42 Independent claims in excess of 3 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1204 84	2204 42 ** Reissue independent claims over original patent	1801	750	2801	375	Request for Continued Examination (RCE)	
l	** Poissue claims in excess of 20 and	1802	900	1802	900	Request for expedited examination	
1205 18	over original patent					of a design application	
	SUBTOTAL (2) (\$) 0	Other fo	ee (speci	fy)			
**or number previously paid, if greater; For Reissues, see above			ced by Ba	asic Filing	Fee P	aid SUBTOTAL (3) (\$) 18	0.00
or number previo	ously paid, it globies, i or reasones, acc above	4				<u></u>	

SUBMITTED BY Complete (if applicable)					
Name (Print/Type)	Allen E. Hoover	Registration No. Attorney/Agent)	37,354	Telephone	312-463-5000
Signature		<u></u>		Date	1/5/2)

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